UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND									
1 Date of R quest: 10-24-03 2 Serial/Patent # 09/583, 263									
3 Please refund the following fee(s):			ER BER	5 DATE FILED	6 AMOUNT				
	Filing				\$				
	Amendment				\$				
	Extension of Time				\$				
	Notice of Appeal/Appeal				\$				
X	Petition	16		9-26-03	\$ 1.30				
	Issue				\$				
	Cert of Correction/Terminal Disc.	•			\$				
	Maintenance				\$				
	Assignment				\$				
	Other				\$				
		7 TOTAL AMOUNT OF REFUND			\$ 130				
		8 TO BE REFUNDED BY:							
10 RE	ASON:		Treasury Check						
	Overpayment	Credit Deposit A/C #:							
	Duplicate Payment	,06-2425							
X	No Fee Due (Explanation):								
PRY	His withdraw prior to considerate	20/	mer	45 C200	totass and				
only (was with chaws)									
J									
11 REFUND REQUESTED BY:									
TYPED/PRINTED NAME: Steve Brantley TITLE: Petition S Att									
SIGNATURE: MANUEL PHONE: 306-X683									
office: /eff/24/									
THIS SPACE RESERVED FOR FINANCE USE ONLY:									
APPROVED: DATE: 16/29/03									
L									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999 Application or Docket Number											ber ·		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								•	SMALL I	ENTITY	OR	OTHER SMALL I	
FOR				R FILED		NUMBER E	7	Г	RATE	FEE		RATE	FEE
BASIC FEE						l		345.00	OR		690.00		
TOTAL CLAIMS			2 / minus 20= * /			F	X\$ 9=		OR	X\$18=	18		
INDEPENDENT CLAIMS			 (minus	3 =	* . 4	D:	H	X39=		1 1	X78=	
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+ 1/ Al - 1/1/ - 100 100 100 100 100 100 100 100 100 1								L	+130=		OR	+260=	57.44
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CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							(Column 3)	SMALL ENTITY			OR	OTHER SMALL	
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(Column 1) (Column 2) (Column 3)							(Column 3)	ΑI	DDIT. FEE	<u></u>	JON	ADDÍT. FEE	
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**	 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 										OR	TOTAL ADDIT. FEE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													